

Radiation Therapists' Knowledge and Perceptions of Health Literacy

Fiona Quinn¹, Charles Gillham², Agnella Craig¹

¹Applied Radiation Therapy Trinity, Discipline of Radiation Therapy, School of Medicine, Trinity College Dublin, Ireland.

² St Luke's Radiation Oncology Network, St. James Hospital, Dublin 8.







"Radiation Therapists' Knowledge and Perceptions of Health Literacy"

- Undergraduate final year project.
- Why this study?
- Aims and methodology.
- Findings.
- Limitations and Conclusion.







Low health literacy leads to 1,2:

- Difficulty understanding health information.
- Increased hospitalisation.
- Poor knowledge of condition .
- Delayed diagnosis.
- Lower use of preventative services/medicines.
- Increased patient anxiety.







- Health Literacy and Radiation Therapy
 - Relatively few studies specific to RT or Oncology.
 - Expanding field of interest.
 - Current Australian study series provided the basis for this study¹.





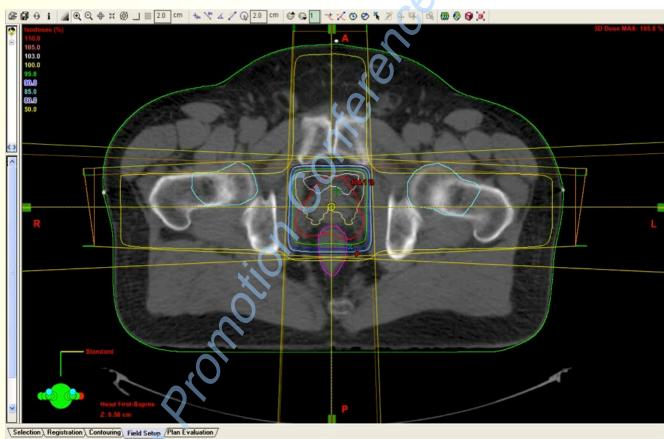


- Radiation Therapy
 - Role of the Radiation Therapist:
 - Daily point of contact.
 - Side effect management.
 - Treatment preparation.









Fields	Dose	Prescriptio	n Field Alignments	☐ Plan	Objectives	☐ Optimizati	on Objectiv	es Do:	se Statistic	s Calculation	n Models	Pla	n Sum									
Group	Field ID	Technique	Machine/Energy	MLC	Field Weight	Scale	Gentry Rtn [deg]	Coll Rtn. [deg]	Couch Rtn [deg]	Wedge	Field X [cm]	X1 [cm]	X2 [cm]	Field Y [cm]	Y1 [cm]	Y2 [cm]	X [cm]	Y [cm]	Z [cm]	SSD [cm]	MU	Ref. [[Gy]
~	Ant	STATIC-I	VarianDEMO_02 - 15X	Static	0.47	Varian IEC	0.0	90.0	0.0	None	7.5	+4.1	+3.4	7.9	+3.8	+4.1	-0.5	1.3	0.0	86.1	123	1.52
~	It lat	STATIC-I	VarianDEMO_02 - 15X	Static	0.27	Varian IEC	90.0	90.0	0.0	EDW250UT	7.5	+4.0	+3.4	8.4	+4.2	+4.2	-0.5	1.3	0.0	78.9	96	1.30
~	rt lat	STATIC-I	VarianDEMO 02 - 15X	Static	0.27	Varian IEC	270.0	90.0	0.0	EDW25IN	7.5	+4.0	+3.4	8.4	+4.2	+4.2	-0.5	1.3	0.0	79.5	95	1.2





Aims and methodology

• Examine:

- RTs' perceptions and knowledge of the concept of health literacy.
- RT's perspectives on how they care for and support patients with low health literacy.
- Obstacles encountered by RTs in dealing with these patients, and how these are overcome.
- Identify RTs' recommendations for the improvement of care of this patient group.





Aims and methodology

Methods and Materials

- Research approach
 - Qualitative
- Participant Population
 - RTs currently working in Irish Departments
- Recruitment Process
 - Invitation via Gatekeeper
- Data Collection
 - Semi-structured interview
- Analysis Method
 - Thematic Analysis
 - Framework method







Findings

- Four key themes emerged:
 - The process of determining a patient's health literacy level.
 - Challenges associated with low health literacy patients.
 - Barriers and Obstacles to helping this patient cohort.
 - Recommendations for improving the management of this patient group.





Theme One: Determining a patient's HL level

- Majority of participants unfamiliar with the formal concept of health literacy.
 - Functional aspect described, with no reference to communicative or critical aspects.
 - Range of visual, verbal and non-verbal cues used to achieve an informal, subjective estimation of a patient's health literacy level.







"I'd say in general it's just patient's knowledge of their treatment, their healthcare and what it means."

"It could be the language they use, you might find people referring to their 'radium treatment' or something, that would usually make you cop on."

"They'll just kind of nod and agree with everything you say."



Theme Two: Challenges associated with LHL patients

- Paternalistic attitude of patients.
- Family interference/decreased patient autonomy.
- Adherence to treatment requirements.
- Assessing patient understanding.
- Validity of consent.
- Determining most appropriate method of information delivery.





"They say the Doctor knows best so I'll do what the Doctor says."

"I'm sure that if you've identified a low health literacy patient you wouldn't give them the option to take a more decisive role in their treatment."

"They may not follow instructions so their side-effects could end up quite bad.....they may not understand and the side effects get very bad before you can prevent it."





Theme Three: Barriers and Obstacles to helping LHL patients

Awareness of LHL as an issue.

Time and Resources.

Ability to tailor communications.







"Our system is so rigid that it's not allowing extra time for anybody."

"Our current time constraints currently hinder our ability to treat any of our patients with the 100% care we should be giving them."

"We have to discuss how to make the communication easier, which method of communication is best."

Theme Four: Recommendations for Improvement

- Awareness
- Education
 - Undergraduate level
 - CPD
- Screening
 - Controversial







"More awareness. More education, staff education."

"Well first of all in order to be aware of these patients, we'd need to be educated on it."

"I think if a patient was highlighted......it would flag it to other healthcare professionals down the line."

"I don't know, are you putting more shame on them?"



Limitations

Self selection of participants.

Only one person interpreting the data.







Conclusion

- Lack of awareness of the prevalence and impact of low health literacy in Irish Radiotherapy departments.
- Creating awareness and providing the relevant training could improve the treatment experience for these patients, at a relatively low cost to the economy.
- Further studies with other health care professionals will provide a wider overview of the issue of health literacy in the Irish health care system.





Thank you

- Thank you for taking the time to listen.
- Any Questions ?

quinnfo@tcd.ie

craigag@tcd.ie







